



Merced County Sheriff's Office
Coroner Division

455 East 13th Street
Merced, CA 95341-6213

Thomas I. Cavallero
Sheriff-Coroner

Mark A. Super, MD
Forensic Pathologist

REPORT OF AUTOPSY

AUTOPSY ☒

EXTERNAL EXAMINATION ☐

DECEDENT: NUSBAUM, LUKE NEAL

CORONER CASE #: 14 - 35835

DATE/TIME OF DEATH: 11/17/2014 @ 11:30

INVESTIGATOR: J. Hicks

DATE OF EXAMINATION: 11/18/2014

TIME OF EXAM: 10:00

AGE: 22

SEX: Male

HEIGHT: 67 ½ in.

WEIGHT: 109 lb.


AUTOPSY FINDINGS

1. Contusion of occipital scalp.
2. Depressed comminuted fractures of left temporal-occipital skull.
3. Acute subarachnoid hemorrhage.
4. Bilateral cerebral contusions.
5. Fractures of right 2nd rib and left 2nd through 7th ribs.
6. Bilateral pneumothoraces and left hemothorax (180 ml).
7. Contusions of both lungs; lacerations of left lung.
8. Fractures of pelvis with separation of right sacro-iliac joint.
9. Abrasions of mid-lower back and dorsal right hand.
10. Postmortem toxicology: negative for ethanol, illicit drugs, and all tested medications.

CAUSE OF DEATH: Blunt impact head, thoracic and pelvic injuries.

Date

12-4-14


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WITNESSES:

Deputy Coroners J. Hicks, L. Fontes and N. Nakamura.

AUTOPSY ASSISTANTS:

Deputy Coroner L. Fontes.

IDENTIFICATION:

The body is received encased in a white plastic body bag that is not locked. The name DOE, JOHN is written on the outside of the bag in black marker ink. The body is unidentified at the time of the autopsy.

Photographs will be taken of the decedent and fingerprints will be obtained.

EVIDENCE OF MEDICAL INTERVENTION:

The body is covered by a purple paper emergency blanket. EKG pads are on both pectoral areas on both sides of the abdomen.

CLOTHING:

The following clothing items are on or about the body.

1. A pair of gray, heavy knit socks that have red soles and blue heels and toes. The bottoms of the socks are dirty, but there is no crusted dirt or holes in the socks. Only a scant amount of dried plant material is stuck to the bottoms of the socks. No significant defects.
2. There is an inner pair of tan socks with green trim. These appear to be relatively clean. No defects.
3. A pair of blue jeans is in place, but there is no belt; brand Levi Strauss, size - waist 29, length 30. The waist button is fastened. There is a button fly that is undone. The pockets have been turned out. The jeans are relatively clean. No significant stains or defects.
4. A pair of black and blue, plaid boxer shorts is in place; brand Hanes, size small. These are relatively clean. No significant stains or defects.
5. A purple hoodie with a zippered front; brand Gap, size small. This is open exposing the underlying garments. No significant stains or defects. The upper back and hood area are blood soaked.
6. A navy blue and white, striped hoodie with gray trim; brand Old Navy, size small. This has a zippered front, which is also opened. The hood area is blood soaked. No significant stains or defects.
7. An inner third hoodie that is green in color; brand Old Navy, size small. This has a zippered front that is also open exposing an undershirt. The hood is blood soaked.
8. A white undershirt that is pushed up, exposing the abdomen; brand Jockey, size small. On the upper front is an irregularly shaped pale tan-yellow stain. No defects.

EXTERNAL EXAMINATION

The clothed, unembalmed body is that of a normally developed, thin but adequately nourished, white or Hispanic male who appears to be approximately 18-25 years of age. The body measures 67 ½ inches long and weighs 109 pounds, as received. Rigor mortis is fully developed in the cold body. Lividity is faint and posterior except over pressure points. There is blood about the back of the head. Some dried blood stains the left hand. The skin is generally clean.

The scalp hair is black, curly and averages approximately 7 cm long. The hair is somewhat mussed. There are rare strands of gray. There is dandruff in the hair, but otherwise the scalp is clean and free of lesions. There is mild frontal balding. There is blood and particles of soil-like debris in the hair at the left occipital region, but no laceration is seen. The eyes appear somewhat sunken and the temples are somewhat sunken, giving the decedent a gaunt appearance. Facial hair consists of a sparse black mustache and beard. The irides are brown and the corneas are filmy. No scleral hemorrhages. There is a solitary right lower conjunctival hemorrhage. No periorbital cutaneous petechiae. Blood exits the left ear. The ears, nose and mouth are free of foreign material. The nasal skeleton and facial bones are palpably intact. The lips are uninjured and somewhat dried. The teeth are natural and in fair condition, but there is peculiar crowding of the upper teeth, such that the right upper lateral incisor and the left upper canine protrude outward, but the upper central three teeth are relatively bent inward. The upper central incisors also overlap slightly. The lower teeth also show peculiar central crowding, with the left lower lateral incisor overlapping the central incisor.

The neck is mobile, but symmetric. No palpable crepitus.

The chest is stable and symmetric. No palpable subcutaneous emphysema. The abdomen is scaphoid and soft. No abdominal surgical scars. The external genitalia are those of a circumcised adult male with bilaterally descended testes.

The extremities are symmetric without angularity or deformity. The fingernails are uninjured and appear neatly kept, extending slightly beyond the fingertips. The fingers are slender. The skin of the palms lack any calluses. On the dorsal right index finger are abrasions over the knuckle and dorsal PIP joints, measuring up to 2 cm. On the dorsal right hand at the base of the index finger is an oval 1.5 cm abrasion. On the dorsal base of the right thumb is a group of parallel longitudinal linear abrasions that vary from 0.2 to 0.7 cm separated from one another by 0.3 cm. A small abrasion is over the knuckle of the right thumb. On the radial right wrist is a superficial 0.3 cm abrasion. No clubbing of the digits. No hesitation type scars on the wrists. No needle tracks. No tattoos. The legs show no evidence of peripheral edema. The toenails are not dystrophic. The toenails appear neatly kept.

On the mid-lower back is a small cluster of abrasions, 6 x 3 cm in area. The anus is unremarkable. A superficial 3 cm abrasion is over the left ischial tuberosity on the medial buttock.

INTERNAL EXAMINATION

HEAD:

The scalp is reflected after making the usual intermastoid incision and reveals a large subgaleal and subscalpular contusion hemorrhage over the occipital scalp. There is a depressed comminuted fracture of the left lateral occipital skull with secondary fracture lines that course upward and backward, entering and separating the left lambdoid suture and then extending upward from there across the right upper occipital skull and onto the right parietal skull. Other fracture lines course downward onto the basilar skull, where there are comminuted fractures of the left posterior cranial fossa, left petrous bone, and the squamous portion of the left temporal bone. No epidural or subdural hemorrhage. The brain weighs 1490 grams and is of the usual configuration covered by glistening, transparent leptomeninges with bloody cerebrospinal fluid. There is bilateral diffuse subarachnoid hemorrhage, especially over the posterior halves of both cerebral hemispheres and the undersurface of the right cerebrum. Contusion hemorrhages involve the lateral left frontal, parietal and occipital lobes and the undersurface of the left temporal lobe. No cerebral lacerations. The vessels at the base of the brain follow their usual anatomic courses and are patent throughout, without significant atherosclerosis, thrombosis or aneurysm. No evidence of coning or herniation. Remote traumatic or non-traumatic abnormalities are not noted on serial coronal sectioning of the brain in the fresh state. No deep cerebral contusions are seen. The ventricular system is symmetric and contains bloody fluid. No lesions are seen in the mid-brain, brainstem or cerebellum. The atlanto-occipital membrane is intact.

NECK:

The hyoid bone is intact, with immobile joints. The laryngeal is intact, with flexible joints. The larynx and trachea are unobstructed and lined by pink-tan mucosa covered by a thin layer of blood-tinged foam. No laryngeal costal edema. No anterior cervical soft tissue hemorrhage. The cervical spine is intact. No anterior prevertebral fascia hemorrhage.

BODY CAVITIES:

The body cavities are entered in the usual manner. Testing for free air in the pleural cavities is positive, bilaterally. The left chest cavity contains 180 ml of liquid blood. The pericardial sac, right chest cavity and peritoneum are free of excess or abnormal fluid accumulations. Free hemorrhage is in the retro peritoneal soft tissue over the lumbar vertebra. All cavities are free of adhesions. The organs are in their usual anatomic locations. The lungs are partially expanded. Serosal surfaces are generally smooth and glistening.

CARDIOVASCULAR SYSTEM:

The heart weighs 210 grams and is of the usual configuration covered by smooth glistening epicardium. No epicardial petechiae. Serial sections show firm red-brown fibrillar myocardium without recent or remote infarcts. The heart walls are not thickened. The endocardium is thin and translucent. The heart valves are normally formed, pliable and intact. No vegetations. The coronary ostia are in their usual locations and are patent. The coronary circulation is right dominant. The coronary arteries are free of atherosclerosis and are patent throughout, without thrombosis. The aorta is intact and free of atherosclerosis. No aneurysms. The vena cava and pulmonary arteries are free of antemortem thrombus. The heart and great vessels contain residual thin fluid blood.

RESPIRATORY SYSTEM:

The lung weights are: Right – 420 grams; Left – 575 grams. The pleural surfaces are smooth and glistening, and the lungs exhibit the usual lobation with absent anthracotic pigmentation. A superficial laceration involves the posterior LUL. The entire posterior surfaces of both lungs are contused, left > right. Sections show fresh hemorrhage within the entire LLL, where there are large intrapulmonary lacerations, due to impact. Subpleural fresh hemorrhage involves contusions of the LUL, RUL and RLL. Non-dependent areas are soft and crepitant, pale pink-tan and dry. The tracheobronchial tree contains bloody frothy fluid, but is unobstructed and without mass lesions.

LIVER AND PANCREAS:

The liver weighs 850 grams and is covered by a smooth intact capsular surface with sharp anterior margins. Sections show slightly softened, red-brown cut surfaces that exhibit the usual lobular architecture without focal intraparenchymal lesions. I can easily pass my thumb through 2 cm thick sections. The gallbladder contains approximately 10 ml of thin green bile and the bile passages appear patent. The gallbladder mucosa is unremarkable. No stones. No portal lymphadenopathy. The pancreas is free of antemortem fat necrosis, fibrosis or significant hemorrhages.

GASTROINTESTINAL SYSTEM:

The tongue is without evident injury. The pharynx is unobstructed. The esophagus is intact and lined by unremarkable grey-tan mucosa. The stomach contains 50 ml of pea-green semi-lucent fluid without identifiable food fragments, pill material or peculiar scent. The gastric mucosa is intact and pink-tan, without ulcers or masses. The duodenum and the remainder of the small and large bowels are without evident mucosal abnormality. The colon contains clumps of formed, but not hard, green-brown feces and is free of blood. No colonic ulcers, hemorrhages or masses. The appendix is present.

SPLEEN AND LYMPH NODES:

The spleen weighs 70 grams and is covered by a wrinkled but intact, blue-grey capsule. Sections show somewhat pale red-brown parenchyma without focal lesions. No enlargement of mediastinal, lung hilar, mesenteric or para-aortic lymph nodes.

ENDOCRINE SYSTEM:

The adrenal glands have the usual thin golden-yellow cortices surrounding thin red medullary centers. No cortical masses or medullary hemorrhages. The thyroid gland is of the usual size, shape and consistency. No thyroid cysts or masses. The pituitary gland is unremarkable.

UROGENITAL SYSTEM:

The kidneys are of similar size and shape, each weighing 70 grams. The capsules strip with ease to reveal smooth cortical surfaces, with mild pallor. Sections show uniform cortical thickness with distinct cortico-medullary junctions. The calices, pelves and ureters are unremarkable. The bladder is empty. The bladder mucosa is unremarkable. The prostate gland is not enlarged.

MUSCULOSKELETAL SYSTEM:

The red-brown muscle is firm and somewhat pale, but without focal lesions. Non-displaced fractures involve the posterolateral aspects of the left 2nd through 7th ribs. The right and left 2nd ribs are both fractured at their costovertebral junctions. Rib fractures are associated with localized fresh intercostal soft tissue hemorrhage. The right sacral iliac joint is subluxed and slightly displaced. The pubic symphysis is slightly separated. There is a non-displaced fracture coursing obliquely through the left pubis. The pelvic fractures are associated with localized fresh hemorrhage. No visible or palpable fractures of the vertebral column or long bones of the extremities. The abdominal fat averages 1.5 cm in thickness.

TOXICOLOGY: Samples of peripheral blood and vitreous humor are retained.

HISTOLOGY: None. Samples of all major viscera are retained in stock.

PHOTOGRAPHS: Digital photographs are obtained of external and some internal findings.

X-RAYS/ EVIDENCE: None.

END: 11:40.